EFFECTIVENESS CHECK QUESTIONNAIRE

This is __________________________, I am calling from ___________________________

(Your name) (Company name)

to determine if you were aware of our company’s recall of ___________________________

(Product Description, with Codes, and Reason)

May I please speak with ___________________________? On ___________________________

(Key Company Contact) (Date)

we sent notification to all companies which may have received this product. Stating that all product should be

_________________________________________________

(Indicate what they were told to do)

I have the following questions to ask you regarding the recall:

Your Name: ___________________________ Your Title: ___________________________

1. Did your company receive notification of this recall? YES ☐ NO ☐

2. Did your company receive shipments of this product? (if NO, terminate questions and close) YES ☐ NO ☐

3. Do you have any of the recalled product(s) on hand? (Can you please check your inventory before asking?) YES ☐ NO ☐

4. Have you or do you intend to ___________________________ associated product? (state what they were supposed to do with product) YES ☐ NO ☐

5. Have you received any complaints associated with the product? YES ☐ NO ☐

If YES, please provide details: _______________________________________________

__________________________________________________________________________

__________________________________________________________________________

Signed: ___________________________ Date: ___________________________

Reviewed By: ___________________________ Date: ___________________________